

FEC
FORM 3

REPORT OF RECEIPTS
AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

11 OCT 19 AM 11:25

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Bob Corker for Senate 2012, Inc.

ADDRESS (number and street)

P.O. Box 848



Check if different
than previously
reported. (ACC)

Chattanooga

TN

37401-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00430462

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

TN

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY
11 / 06 / 2012

DD / MM / YYYY

YYYY / MM / DD

in the
State of

XX

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY
11 / 06 / 2012

DD / MM / YYYY

YYYY / MM / DD

in the
State of

XX

5. Covering Period

MM / DD / YYYY
07 / 01 / 2011

DD / MM / YYYY

YYYY / MM / DD

through

MM / DD / YYYY
09 / 30 / 2011

DD / MM / YYYY

YYYY / MM / DD

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kimberly Kaegi

Signature of Treasurer

Kimberly Kaegi

Date

MM / DD / YYYY
10 / 11 / 2011

DD / MM / YYYY

YYYY / MM / DD

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)